				Application or Docket Number				
PATENT APPLICATION LE DETERMINATION RECO Effective October 1, 2000			1 926056					
		(Column 2)	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			RAT	E FEE	7.	RATE	FEE	
FOR NUMBER FILED		NUMBER EXTRA	BASIC	FEE	OR	BASIC FE	E 860	
TOTAL CHARGEABLE CLAIMS	minus 20=	. (->-	X\$ 9	=	OR	1/2/2		
INDEPENDENT CLAIMS	DENT CLAIMS / minus 3 = *		X40:	_	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT				-				
* If the difference in column 1 is less than zero, enter "0" in column 2		+135		OR	L	6027		
CLAIMS AS AMENDED - PART II			IOIA	<u> </u>	OR	TOTAL	<u> </u>	
(Column 1)	(Colur	mn 2) (Column 3)	SMAL	L ENTITY	OR		R THAN ENTITY	
V TOTAL Total Independent Total Independent	HIGH NUMI PREVIC PAID	BER PRESENT DUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus ++	=	X\$ 9=	:	OR	X\$18=		
Independent + FIRST PRESENTATION OF MI	Minus ***	= .	X40=		OR	X80=		
TINGT PRESENTATION OF MI	DETIPLE DEPENDENT	CLAIM	+135=	:	OR	+270=		
			TOTA		OR	TOTAL		
(Column 1)	(Colun	nn 2) (Column 3)	ADDIT. FE	: 		ADDIT. FEE	!	
CLAIMS REMAINING AFTER AMENDMENT Total	HIGH NUME PREVIO PAID F	BER PRESENT BUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus **	= ′	X\$ 9=		OR	X\$18=		
Independent •	Minus ***		X40=		OR	X80=		
FIRST PRESENTATION OF MU	ILTIPLE DEPENDENT	CLAIM	+135=		OR	+270=		
			TOTA	<u>. </u>	ام	TOTAL		
(Column 1)	(Colum	on () (Column ()	ADDIT. FE	E		ADDIT. FEE	<u></u>	
CLAIMS	(Colum HIGHE	ST		ADDI-	1 1		ADDI	
Total * Independent *	NUMB PREVIOU PAID F	USLY EXTRA	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus **	=	X\$ 9=		OR	X\$18=		
Independent +	Minus ***	=	X40=					
FIRST PRESENTATION OF MU	LTIPLE DEPENDENT	CLAIM	740=	-	OR	X80=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.			+135=		OR	+270=		
** If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3."				<u> </u>		TOTAL DDIT. FEE		
The "Highest Number Previously Paid	For" (Total or Independen	nt) is the highest number t	lound in the a	propriate box	in colu	mn 1.		
RM PTO-875								

Application or Docket Number